

Department of Public Health
and Human Services

Section:
APPLICATION PROCESS

TANF CASH ASSISTANCE

Subject:
Confidentiality

Supersedes: TANF 101-1 (07/01/05)

References: MCA 41-3-205; ARM 37.78.106; ARM 37.78.102

GENERAL RULE--The Department of Public Health & Human Services (DPHHS) may share client information for purposes directly connected with the administration of the TANF cash assistance programs with other federal programs and certain entitled entities.

**AGENCY
PERSONNEL**

Only qualified program employees, restricted from disclosing confidential information, shall conduct the required interviews.

NOTE: Non-program employees may conduct interviews or certify applicants when specifically allowed under federal regulation (e.g., federally declared disaster).

VOLUNTEERS

Volunteers or others who are not employed by DPHHS may not determine eligibility. However, they may assist in related activities such as:

1. obtaining necessary information; and
2. helping applicants complete the application form.

Volunteers are restricted from disclosing confidential information.

**RELEASE TO
PARTICIPANT**

The applicant/participant may review all information in the case file that was considered when making the eligibility determination. Privileged information, such as the name of individuals who have disclosed information about the household without the household's knowledge or the nature or status of pending criminal prosecution, may be withheld.

The agency must also make available, **without charge**, the specific materials necessary for a household or its representative to determine whether a fair hearing should be requested or to prepare for a hearing.

**RELEASE TO
OTHERS
WITHOUT PRIOR
AUTHORIZATION**

Confidential information concerning the applicant or participant, without notice to or permission of the individual, may be provided and used for the following purposes:

1. Reporting child abuse and neglect to the appropriate authority (MCA 41-3-205);

2. Conducting child support activities;
3. Establishing eligibility and administering (including audits, investigations, prosecutions, etc.) federal programs or federally assisted programs which provide assistance (cash, in-kind, or services) directly to individuals based on need.



NOTE: When the county office receives a request for information related to fraud investigations involving TANF or Medicaid programs, refer the requestor to the appropriate policy specialist.

4. Only the participant's address can be released to a federal, state or local law enforcement officer who presents a written request for information which includes the participant's name and specifies that the individual:
 1. is fleeing to avoid prosecution, custody or confinement for a felony;
 2. is violating a condition of parole or probation; or
 3. has information necessary for the officer to conduct official duties.
5. When information is necessary to provide emergency medical care for the participant, the information must be released. As soon as possible thereafter, the applicant or participant must be notified of the release of information.
6. Notification of an appropriate person, authority or other entity that an applicant or participant is making threats to harm himself or herself or to harm others, in order to prevent or lessen the threatened harm.

Requests for information about current or past participants who do not meet the above criteria must be submitted in writing to the Regional Policy Specialist. When there is a question about a breach of confidentiality, the request will be referred to the Office of Legal Affairs.

**AUTHORIZATION
TO RELEASE
INFORMATION
HCS-101**

This form is used to assist the applicant/participant in obtaining information necessary to determine eligibility. HCS-101 explains the client's right to confidentiality and gives the applicant/participant the option of authorizing the release of information or declining to authorize the release of information.

EXAMPLE: An applicant has been working and is unable to provide verification of current income. The Eligibility Case Manager should use the signed HCS-101 to contact the employer and obtain verification of income to assist the applicant.

The authorization expires one year from the date of signature, so must be completed at application and yearly thereafter. The participant/applicant always has the right to rescind the authorization in writing. Because an individual cannot waive another's right to confidentiality, each adult household member should be given the opportunity to review and sign the HCS-101.

NOTE: **Signing the HCS-101 is not a condition of eligibility.** However, if the participant/applicant does not wish to sign the form it should be case noted that they were given the opportunity, refused and intend to provide the information without assistance.

**ONE TIME ONLY
AUTHORIZATION
TO RELEASE
INFORMATION
HCS-102**

HCS-102 is used for incident specific release of information. The applicant/participant needs to be very specific about what information they are authorizing to be released. Not every applicant/participant would need to sign the form. This should only be signed as needed on a case by case basis. The client sets the amount of time the authorization is in effect for and can rescind the authorization at any time in writing.

EXAMPLE: A WoRC Case Manager may need to obtain a copy of a treatment plan from CFSD Social Worker in order to coordinate the treatment plan and Family Investment Agreement/ Employability Plan (FIA/EP) activities. The participant would complete the HCS-102 and would select the length of time that the authorization will be in effect.

**INTER-AGENCY
AUTHORIZATION
TO RELEASE
INFORMATION
HCS-103**

HCS-103 is used to share information between agencies that is necessary to facilitate case management. It is used to share general participation information such as progress reports, enrollment, attendance and participation. The participant/applicant would only need to sign this form if they are involved in case management activities with the WoRC case manager.

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